



The Journal

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Illustration By MC3 Julio Martinez Martinez



MWR Holds Mud Run



Jones Retiring
After 41-Year
Military Career
- Page 3



First Lady
Visits
WRNMMC
- Page 5



New App Aims
to 'Stop the
Bleed'
- Page 10

Celebrating the Fourth

DoD photos by MC2 Kevin Cunningham
WRNMMC Command Communications

In preparation for the Fourth of July, members of the American Red Cross — Walter Reed National Military Medical Center Red Cross Pack Animal Visitation Program held a photoshoot June 24 for patients and staff. The Red Cross Pack also visits patients and staff throughout the Medical Center.



Bethesda Notebook

Prostate Cancer Support Group

The Prostate Cancer Support Group meets at Walter Reed National Military Medical Center the third Thursday of every month. The next meeting will be July 19 from 1 to 2 p.m. and from 6:30 to 7:30 p.m. in the America Building, River Conference Room, the third floor. Spouses and partners are invited to attend. Military identification is required for base access to WRNMMC. For those without a military ID, call the Prostate Center at 301-319-2900 at least four business days prior to event for base access. For more information, contact retired Army Col. Jane Hudak at 301-319-2918 or jane.l.hudak.ctr@mail.mil.

Code White Exercise

A Code White exercise is scheduled to take place some time during the week of July 16 at Walter Reed Bethesda. Code White is used to notify personnel of an active shooter and to shelter-in-place. The exercise will occur during normal working hours and should not impact patient care. During the exercise, there should be no movement throughout the hospital and all staff and departments should shelter-in-place. Visitors will be asked to remain where they are or may be escorted to a secure location. The exercise is scheduled to last no longer than 15 minutes.

DEOCS Survey

The 2018 Defense Equal Opportunity Management Organizational Climate Survey runs from July 9 through Aug. 2. The survey provides an opportunity for staff members at Walter Reed National Military Medical Center to share their concerns and issues with WRNMMC leaders. The survey link and passwords will be coming soon. All staff members are encouraged to participate in the survey.

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Jones Retiring After 41-Year Military Career

By Andrew Damstedt
The Journal

He had one last shot to pass his Navy swim test. So he jumped in, tuned everything else out and started treading water.

It was 1988, Marvin Jones was one of about 50 Navy recruits at officer candidate school in Newport, Rhode Island who had to take remedial swimming after failing the Navy swim test. He could pass swimming laps and jumping into deep water, but it was treading water where he failed every time over the previous five and a half weeks.

"He would just sink like a rock," his wife, Lillian Jones remembers.

He excelled in everything else and received the Navy League's Alfred Award, but was feeling the pressure to pass the swim test. During his last try, he zoned everything else out while treading water, so much so that the instructors had to pull him out of the water after he reached the required time.

"He goes, 'I never felt so happy in my life. How am I going to win the top award, lead my class and I flunk the swim test,'" she says.

That was the beginning of now retiring Capt. Marvin L. Jones 30-year Navy career. It was beginning after switching from the Air Force where he had already served for 10 years.

On Aug. 17, Jones is set to retire from the Navy and pass the baton of commanding officer, Naval Support Activity Bethesda.

MILITARY CAREER

Jones was commissioned as a Navy ensign in 1988 after serving for 10 years in the Air Force. He's served in several leadership roles, including as the Navy Medicine Chief Diversity Officer; assistant commandant and Navy Company Commander, Uniformed Services University of the Health Sciences; and director of administration for a 374-member forward deployed Level III medical treatment facility with Expeditionary Medical Facility Kuwait.

He was commanding officer for Naval Health Clinic Charleston until 2015 when he became NSAB's fourth commanding officer.

His brother, Thomas Jones, says he was surprised when Jones followed him into the Air Force even though there were many family members in the military.

"I thought he was on his way to college," he says.

He says his family is proud of all the promotions Jones has received in the Navy.



U.S. NAVY PHOTO BY MC3 WILLIAM PHILLIPS

Naval Support Activity Bethesda held a celebration for Martin Luther King Day, January 16, 2017. Capt. Marvin Jones, NSAB commanding officer, gave the opening remarks for the celebration.

"We are extremely proud of Marvin," Thomas says in a phone interview. "He's made my mom extremely proud and I know she is going to cry at his ceremony, so tell him to get ready for it."

His son, André says the first time he saw his father not in uniform, he told his elementary school teacher his dad didn't have a job anymore.

"I had the assumption that he had no job because when I left for school, he was home and stayed in the same clothes," André says. "My dad told me, 'No, I do have a job, I'm becoming a commissioned officer in the Navy.' I was accustomed to him wearing a uniform."

Lillian says he's loved all the jobs he's had in military career but one that stands out is being selected to be the Navy's diversity officer.

"He had the opportunity to travel all over the world and every major installation and teach diversity," she says. "He just loved it. I can't say it was his favorite because in every assignment there's something great that he liked about it."

At NSAB, Executive Director Bill Meekins said Jones' policy of "the answer is yes, now what's the question" has really increased what NSAB does and what we can do. And we really do strive to get to yes."

He described Jones as a "servant leader" who does everything he can to help employees and Sailors succeed in their jobs.

"He doesn't just speak with the leaders, he speaks with the doers and gets their take on how things are going, and what things are working and what things aren't working," Meekins said.

One of his long-time friends in the service, retired Navy Capt. Jimmy Bradley, says he met Jones in the summer of 1999 when they both worked at the Bureau of Medicine and Surgery.

"Marvin is by far one of the sharpest Medical Corps Service officers I have had the pleasure of working with – I always tell him he's my mentor," Bradley says. "He's such a positive person and he always wants to reach out and lend a hand."

Bradley says Jones has mentored many service members in his career.

"He's done a lot for our Corps and for our Navy and for our country," Bradley says. "He's reached back and pulled other people up behind him to help them realize their career goals. A lot of junior officers will tell you if it wasn't for Marvin Jones, they wouldn't have been promoted or commissioned or gotten to school because of his counsel."

Bradley says he considers Jones a family member.

"We always say we can choose our friends, but we can't choose our family; but if I could choose a family member I would choose Marvin Jones as a brother," Bradley says.

FAMILY LIFE

Jones met his wife, Lillian, while he was in the Air Force and they were competitors in a dance competition at the noncommissioned officers club. At first, she says they didn't like each other but would often end up together with his cousin and her best friend who were dating.

The dislike even led her to keep his job application for a part-time position with MWR at Beale Air Force Base, where she was working at the time, at the back of the pile.

"He'd come and check on the status of the job he applied for and I'm like, 'You haven't moved up on the list,'" she says. "Then as time went on and we grew on each other and became friends and started dating. It took almost a year before we're just tolerable, then became besties from there."

He eventually got the part-time job as a recreation specialist.

They dated for three years and were married in 1981.

His two children, André and Alicia, remember their father as a movie buff.

"Both my sister and I started off as dancers in dancing videos," André says. "It was cool when we had to shoot a movie and got to hang out with Anfernee Hardaway and Shaq, and dad, being the biggest fan was always volunteering to be the parent chaperone."

Alicia says he would often take her and her brother to the movies on a "daddy fun day."

"He was pretty strategic about planning it, he would get the newspaper clipping with all the movie times, he would know which movies were playing on which side of the theater and which one ended when so we could attend the other without disruption and not too long of a line," she says. "Movie going was an art and he was a master at it."

She says he also made sure his children had a good example to follow.

"He's never been a person who wanted to be in the limelight," she says. "He never wanted to be in the forefront. He leads behind the curtains, which I find extremely commendable."

While he can have a sometimes stern, stoic face, he's "super silly and can recite any line from a 'Simpsons' episode, tell you the season and the title of the episode. And with his granddaughters, he is a puddle of mush. He's one of the coolest guys I know."

André also learned some valuable lessons from his father like the time he lost his dad's work pager.



PHOTOS BY HN KYLEE HERRING

Capt. Barry Adams, right, assumed command of the National Professional Development Center from Capt. Jeffrey Andrews June 22 while Navy Medicine Education and Training Command Commander Rear Adm. Rebecca McCormick-Boyle looks on.



Capt. Barry Adams, second from left, cuts the cake with others after he assumed leadership of the Navy Medicine Professional Development Command June 22. From left, Starla Adams, Capt. Barry Adams, Capt. Jeffrey Andrews, Rear Adm. Rebecca McCormick-Boyle and Bonnie Zemek.

Adams Assumes NMPDC Command

By Lt. Cmdr. Kinau McCoy
NMPDC Head of Graduate Programs

Command of the Navy Medicine Professional Development Center (NMPDC) changed during a ceremony in Walter Reed National Military Medical Center's Memorial Auditorium on June 22.

Capt. Barry Adams assumed command from Capt. Jeffrey Andrews during a combined change of command and retirement ceremony.

Andrews is retiring from the Navy after 30 years of service, the last two years as NMPDC's Commanding Officer. Adams, a Licensed Clinical Social Worker, most recently served as the Executive Officer of Naval Medical Research Unit San Antonio, at Joint Base – San Antonio, Fort Sam Houston, Texas.

Rear Adm. Rebecca McCormick-Boyle, Commander, Navy Medicine Education, Training and Logistics Command, was the change of command ceremony officiating officer.

"The change of command focuses on two officers and the transition of leadership from one to the other, but the ceremony also prompts reflection on our individual and collective service and the achievements of this great command," McCormick-Boyle told the audience.

McCormick-Boyle highlighted several mission accomplishments under the helm of Andrews and thanked the men and women of NMPDC for the critical role they play in the development of knowledge, skills, abilities, and character to care for America's sons and daughters.

"Your mission set includes DoD's sole Postgraduate Dental School; oversight of Navy Medicine's Graduate Medical Education, management of out-service training, continuing education and certification, specialty training, and leadership development for the Hospital Corps and officers," McCormick-Boyle said. "Indeed, your impact on Navy Medicine's character and competence runs quite wide and deep."

Following the ceremonial pinning of the Navy Command Ashore insignia by his wife, Starla, Adams



PHOTO BY HN KYLEE HERRING

Capt. Barry Adams, second from right, assumed leadership of the Navy Professional Development Center during a change of command ceremony June 22. From left, Rear Adm. Rebecca McCormick-Boyle, Mr. Donald Sigley, Jr., Capt. Jeffrey Andrews, Adams, and Capt. Dale White were in attendance.

said that he was honored to take command from Andrews and looked forward to his new assignment.

"We hear a lot about readiness, competency, character, and trust — words we try to get in the right order," said Adams. He then charged his staff to continue to "work hard to make these words come to life and mean something."

Guest speaker for Andrews' retirement, Retired Navy Cmdr. Donald Sigley Jr., talked about their close friendship and brotherhood since growing up a few houses from each other in a small, blue-collared town in Pennsylvania, and he regaled the audience with some of their (mis)adventures before both joining the Navy. He went on to share that "[Andrews'] naval career is full of success, and his positive impact and life-long teachings to countless military personnel are priceless!"

Andrews expressed his gratitude and appreciation to all of those who made a difference along his journey, saying, "I am constantly humbled by the quality of people I am lucky to serve with and those who have supported me all of my life."

Andrews said he was especially thankful to his

close friends and family attending, including his children, Kelly and Nate; sisters, Sue and Jan; and girlfriend, Bonnie. Andrews paid tribute to his late mother as the "heart, energy, and humor of our family," and to his father, whom he reflected, "taught me how to develop the character habits of integrity, duty, dedication and to stay in the fight and never quit. He is my Hero."

Andrews concluded that "Capt. Adams is the right man at the right time to lead you into an exciting future and continue the NMPDC tradition of excellence."

NMPDC, located in Bethesda, Maryland, is the cornerstone of Navy Medicine's professional training, leadership development, and education mission; maintaining collaborative relationships with more than 300 military and civilian higher learning institutions while annually supporting 3,000 Federal uniformed services, civilian, and allied foreign military members. NMPDC is an Echelon-four command reporting to Navy Medicine Education, Training and Logistics Command, San Antonio, Texas.



First Lady Visits Patients, Families, Staff at WRNMMC

DoD photo by Sandy Dean
WRNMMC Command Communications

First Lady Melania Trump visited with wounded service members, their families and staff at Walter Reed National Military Medical Center July 3. Following her visit to WRNMMC, the first lady tweeted that she had a “wonderful visit” and offered thanks to the “many dedicated service members [and] medical staff who take such good care of our men [and] women in uniform.”

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Former Patient Urges Graduates to Keep Excelling, Inspiring

By Bernard S. Little
WRNMMC Command Communications

A former patient of Walter Reed National Military Medical Center, who's also a retired Army colonel and actor, encouraged graduates of the National Capital Consortium to keep excelling and inspiring during commencement June 22 in Bethesda, Maryland.

The NCC, which hosted its 2018 National Capital Area Joint Graduation in The Music Center at Strathmore, includes WRNMMC, Uniformed Services University, Fort Belvoir Community Hospital and Malcolm Grow Medical Clinics and Surgery Center. The more than 300 graduates included interns, residents and fellows who trained in a various dental, pharmacy, health care and business admission programs lasting from one year to six years. Retired Army Col. Gregory D. Gadson, who lost both his legs above the knees in an improvised explosive device attack in Iraq in 2007, served as guest speaker at the graduation.

Following his injuries, Gadson remained on active duty in the Army, eventually serving as the garrison commander of Fort Belvoir, Virginia, where he oversaw the daily operations of the post, a strategic sustaining base where more than 50,000 military personnel and employees provide logistical, intelligence, medical and administrative support, and command and control for a mix of more than 140 commands and agencies for the Department of Defense. He retired as a colonel in 2014 after more than 26 years of service.

Gadson also had lead acting roles in the movie



DOD PHOTO BY BERNARD S. LITTLE

Retired Army Col. Gregory D. Gadson, who lost both his legs above the knees in an improvised explosive device attack in Iraq in 2007, serves as guest speaker at the National Capital Consortium's 2018 National Capital Area Joint Graduation in The Music Center at Strathmore, in Bethesda, Maryland, June 22.

Battleship, as well as in season one of the CBS family television series The Inspectors.

"I think the most important thing you represent is hope," Gadson said to the NCC graduates. "Eleven years ago, I was wounded," he added. "My life was turned upside down, and who did I look to, who did my family look to? We looked to men and women like you...to be honest, to be frank, and to also provide hope, hope for a future, hope that we could get our lives back together."

"Every single one of you, regardless of your specialty, is a leader," Gadson continued. "You don't get to defer that responsibility," he furthered. "When you're in uniform, those who are junior to you see an officer and they expect you to lead by example. Just because you may not be on the frontlines or in the places you think are leadership supreme, you still have a responsibility to live up to that example, make that a habit and make it your character. When you have that, you will have an additional credibility that will make you even more powerful. Don't be afraid of being wrong, stay humble to your profession and stay humble to your patients."

Gadson also called the graduates "champions," adding that service members fight because of love for their country. "We also fight because we know we're going to be taken care of; we know that our country is going to do the best in honoring our service. You all represent that promise to the American people and to the American Soldier and service member... that you will do everything you can to make sure we get back home."

"You all are going to have the lives of our service members in your hands," Gadson said to the graduates. "Some of you are going to create new and life-changing procedures, as our military medicine has done throughout history. The cutting-edge procedures and activities that have been created

on the battlefield and in military medicine have migrated to our civil society. You are on the cutting-edge of medicine." He added this is the expectation of service members and society as a whole.

Navy Capt. (Dr.) Mark Kobelja, WRNMMC director, agreed, adding the graduates "really have accomplished something special." He credited their efforts in helping the medical center achieve a number of accomplishments, including recent accreditations and re-accreditations by the Joint Commission and other professional organizations.

"Your engagement and participation, because you are there day and night, weekends and holidays, watching what is happening in our highly complex health-care environment, you join us, the faculty and administrative staff, helping to improve this [facility]; those are your victories. Walter Reed Bethesda is better today because you studied here," Kobelja said.

The WRNMMC director also saluted the "dedicated" faculty that enabled the graduates to achieve success. He said the faculty members helped create and build the graduate medical education concentrations into "premier programs attracting the nation's best students of medicine and allied health."

Also during the ceremony, awards were presented to graduates, faculty and staff members for excellence in research, teaching, practice and outstanding performance in GME.

- Army Capt. (Dr.) Gregory M. Lai earned the Outstanding Intern Award, as selected by the intern program directors based on the best academic performance, compassion for patients and outstanding interpersonal skills.
- Army Maj. (Dr.) Jigarkumar A. Patel received the Lt. Neil Holland Award for the house staff member who best exemplifies excellence

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in teaching, humanitarianism, ability as a clinician, instructor, counselor and mentor voted on by the intern class.

- Dr. Joan B. Ritter earned the Outstanding Faculty Award, presented annually to the staff physician who is voted by the current intern class to be the most outstanding physician, teacher and role model.
- Navy Lt. (Dr.) Sara L. Robinson (resident) and Air Force Capt. Whittney A. Warren (fellow) received the Gen. Graves B. Erskine Award for the outstanding resident and fellow as determined by a selection committee.
- Army Maj. (Dr.) Daniel J. Coughlin earned the Maj. Gen. Lewis A. Mologne Award for the physician in training who best exemplifies those quality of the late general and WRAMC commander, including a commitment to the care of patients, loyalty to country, respect for truth, honesty, and dedication to the practice of medicine as exemplified by Mologne.
- Navy Cat. (Dr.) Gregory H. Gorman received the Vice Adm. James A. Zimble Award as the program director whose contribution, dedication and interest in teaching have significantly supported the WRNMMC GME program.
- Army Maj. (Dr.) Paul G. Peterson earned the staff physician teacher of the year award, selected by a committee of program chairs and house officers who determines the recipient best demonstrates the attributes of a knowledgeable, accomplished clinician, and dedicated and tireless instructor, and a principled, compassionate leader.
- Navy Lt. Cmdr. (Dr.) Taylor A. Banks and Air Force Lt. Col. (Dr.) Peter A. Learn earned the Lt. Gen. Claire L. Chennault faculty recognition awards for overall excellence, professional medical expertise and personality traits of

innovativeness, fairness, leadership and tenacity in the face of adversity as determined by a selection committee.

- Navy Lt. Cmdr. (Dr.) Lisa C. Young, received the Chennault award for outstanding psychiatry faculty member for overall excellence in teaching, supervising, mentoring, research and leadership, and who has contributed to the advancement of GME psychiatry training programs.
- Navy Cmdr. (Dr.) Matthew J. Bradley, earned the GME mentor award as the faculty member who has had a profound impact on an individual or group of individuals as a mentor.
- The Internal Medicine Team of Navy Lt. (Dr.) Thomas E. Mellor, Army Capt. (Dr.) Sarah M. Ordway and Army Capt. (Dr.) Zachary C. Junga earned the Innovative Curriculum Award for developing a GME curriculum that significantly improves resident education or patient outcomes.
- Patricia A. Bass earned the Program Coordinator of the Year Award for outstanding contributions toward the success of NCC residency and fellowship programs.
- Army Capt. (Dr.) Richard L. Purcell (clinical research) and Navy Lt. (Dr.) Jenna N. Nadolsky (laboratory research) earned the Bailey K. Ashford Award, presented annually to the WRNMMC house staff member judged to have accomplished the most outstanding research during training.

And those earning the Robert A. Phillips Award were: Navy Lt. Cmdr. (Dr.) Christine M. Puthwala (resident clinical study); Air Force Capt. (Dr.) Whittney A. Warren (fellow clinical study); Army Capt. (Dr.) Patrick D. Grimm (resident laboratory study); Navy Lt. Cmdr. (Dr.) Katherine N. Vu (fellow laboratory study); Navy Lt. (Dr.) Kenneth R. Feehs



DOD PHOTO BY BERNARD S. LITTLE

Graduates from the National Capital Consortium's 2018 National Capital Area Joint Graduation enter The Music Center at Strathmore in Bethesda, Maryland for the commencement June 22.

(poster) and Army Maj. (Dr.) Rebecca M. Ortolano (poster). The RAP award recognizes the outstanding individual research projects in both staff/fellow and resident categories presented during the annual National Capital Region Military Research Competition.

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MWR Holds Mud Run



U.S. NAVY PHOTOS BY MC3 JULIO MARTINEZ MARTINEZ

A participant of the Naval Support Activity Bethesda Morale, Welfare, and Recreation annual Warrior Mud Run crawl through the mud as the event kicks off, July 7. The Warrior Mud Run is a race filled with a variety of obstacles designed to challenge women, men, and youth of all fitness levels.



A participant completes the fence climbing challenge.



A participant completes the rope portion of the competition.



A participant climbs over tires as part of the obstacle challenge.



Participants stretch before the start of the competition.



Participants get cleaned up by sliding on a soapy mat after the completion of the annual Warrior Mud Run competition.



Participants from all over the DC Metro area came out to participate in Naval Support Activity Bethesda's Morale, Welfare, and Recreation's annual Warrior Mud Run.



Families get ready to begin the Mud Run.



Parents teamed up with their children to compete in various obstacles.



Participants complete the tire flip challenge.

Part

New App Teaches Citizens to ‘Stop the Bleed,’ Save a Life

By Sarah Marshall
USU External Affairs

Knowing what to do to save a life in the aftermath of a mass trauma event — natural disaster, vehicle accident, or violent attack — is now right at the touch of a button. Uniformed Services University’s (USU) National Center for Disaster Medicine and Public Health (NCDMPH) recently launched “Stop the Bleed,” a free iPhone and Android app designed to teach users how to stop life-threatening bleeding in an emergency — and hopefully save lives.

“We are extremely proud to make the app available to the public,” said Dr. Thomas Kirsch, director of NCDMPH. “It’s an important step in the ‘Stop the Bleed’ initiative, which is an effort to teach citizens how to save lives from major trauma the same way bystanders would administer CPR to someone in cardiac arrest.”

“Stop the Bleed” is a White House-launched effort between several Federal and civilian agencies, including USU. The initiative launched in 2015 to teach citizens how to save lives from major trauma the same way bystanders would administer CPR to someone in cardiac arrest. But it’s not like other public education campaigns — it’s based on important lessons learned on the battlefield and a decade of research by the U.S. military. Researchers found that equipping troops with individual first aid kits that contain tourniquets and hemostatic dressings to control severe blood loss, combined with training on hemorrhage control for medical and non-medical forces alike, paid off. Thousands of lives have been saved on the battlefield.

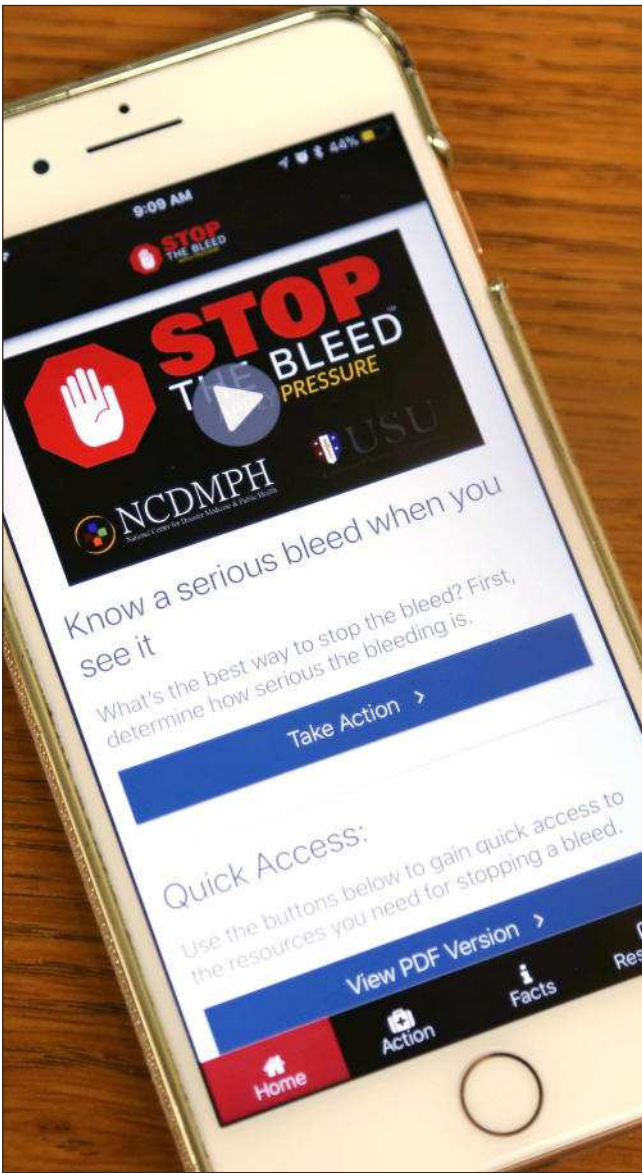
“Our hope is that the ‘Stop the Bleed’ app empowers

individuals to take action in the crucial minutes before first responders arrive,” said Dr. Craig Goolsby, science director at NCDMPH. “The ‘Stop the Bleed’ app provides instant access to instruction on differentiating life-threatening bleeding from non-life threatening bleeding, and how to apply tourniquets to stop bleeding.”

“Severe bleeding can lead to death in less than 5 minutes”

In an actual emergency, bystanders can open the app for step-by-step instruction on how to help — there’s even an audio version so they can freely use their hands while helping another individual who may be bleeding profusely. The app also features tutorial videos to teach users how to correctly apply tourniquets, and includes other useful resources to empower individuals to “Stop the Bleed” and save a life in an emergency. As part of these efforts, the new “Stop the Bleed” app is designed to educate users on what to do in an emergency, and how to determine the severity of bleeding.

As part of this initiative, Goolsby’s team of researchers also published three studies looking at the lay person’s ability to apply tourniquets, measuring which tactics are most effective for teaching the public how to apply these techniques. They have also recently received a grant to develop a layperson tourniquet. Through their research thus far, USU researchers have also discovered that an untrained person could effectively apply a tourniquet just by learning on the spot — what they refer to as “just in time” training. Based on these findings, the lay person would know what to do to “stop the bleed” about 50 percent of the time with “just in time” training, however, if they have just 15 minutes of web-based training, combined with



DOD PHOTO BY SARAH MARSHALL

The new “Stop the Bleed” app includes videos that can help teach average citizens how to control severe blood loss in a mass trauma event.

“just in time” training, this jumps to a success rate of 75 percent. They also found that those who had web-based training were not only willing, but also able to use the tourniquets quickly, and could also tell which wounds required tourniquets.

Goolsby and his colleagues, including staff from NCDMPH and Department of Military and Emergency Medicine, in collaboration with the University of Virginia and Charlottesville, Va., have also been working on a study as part of this initiative. They hope to determine which types of dressings would be easiest for the layperson to use, to control blood loss.

Additionally, last year, Goolsby developed a Stop the Bleed Education Consortium (SBEC). This informal group of medical educators, public health professionals, and clinicians with expertise in hemorrhage control, has been working to define what it means to be “Stop the Bleed” trained, since this previously was had not been defined through the course of this initiative. The group has also been reviewing existing “Stop the Bleed” training programs, and implementing ways to ensure their efficacy.

“We want people to understand how to provide lifesaving support, but we also want people to have access to the most effective lifesaving support kits, and we want them to know the phrase, ‘Stop the Bleed,’” Goolsby said.

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WRNMMC Soldier Shares Life-Saving Story

By MC2 (SW) Kevin V. Cunningham
WRNMMC Command Communications

There are few things Army 1st Lt. Shauna Pearson enjoys more than her life as a military doctor and competing as an endurance athlete, yet she was willing to put that all on the line for a fellow Soldier.

In 2015, Pearson found out her roommate's brother, Army Sgt. Maj. Miguel Filipo, an active duty Soldier injured in Iraq, was in need of a kidney. "My first reaction was, 'I want to get tested; I want to help him out,'" said Pearson.

At the time, Pearson was a full-time graduate student at the University of North Carolina and officer in the Army Reserve. Should the surgery go wrong, she risked not only her life as an avid runner, but her military career as well.

The risks didn't sway her. "This is what I wanted to do and so I was going to do it," said Pearson. "I feel like anyone in my position would do the same. It was just the right thing to do."

After a successful surgery, Pearson struggled with the adjustment. "I was exhausted for three to four weeks and frustrated because I'm such an active person. When I did start running again, it was difficult not running as far and fast as I used to," said Pearson. Once again, she was determined to do what she wanted, and six months after surgery she ran the Boston Marathon.

After serving six years as an enlisted Soldier, Pearson said the road to today has been long and unexpected. She enlisted as a welder, explaining that coming from a family who did construction



COURTESY PHOTOS

Army 1st Lt. Shauna Pearson (left) meets with Sgt. Maj. Miguel Filipo, to whom she donated a kidney, following their 2015 surgeries.

work, welding was something that was familiar to her.

"That was really the only job I wanted to do when I went into the recruiter's office," she explained.

Pearson then earned her commission in 2013. She graduated with a doctorate in audiology and came to Walter Reed National Military Medical Center in 2017.

"I love my job," said Pearson. "Every single day I come to work I'm so happy to be doing what I do."

As an audiologist, Pearson provides service members support from hearing readiness to hearing exams.

"Though this is not what I thought I would be doing, this is exactly where I want to be: able to serve fellow Soldiers as an active duty Soldier," Pearson said of her current job as an audiologist. "I love it."

Pearson completes her externship at WRNMMC this summer and moves on to her next duty station as head of an audiology clinic in South Korea.

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WRNMMC Nursing Team Honors Members

By Bernard S. Little
WRNMMC Command Communications

The Directorate of Nursing Services at Walter Reed National Military Medical Center recently honored four of their team members, as well as their former director, with DAISY nursing awards.

Each month, the WRNMMC nursing team recognizes one of their own with the DAISY Award for Extraordinary Nurses, established by the DAISY Foundation and family of J. Patrick Barnes to recognize nurses and the care and support they provide patients and their families.

Nurses at WRNMMC who recently earned the DAISY Award for Extraordinary Nurses include: Navy Hospitalman Alona Altuhov, of 4 East (February); Navy Ensign Elexa Sherman, of 5 West (March); Navy Lt. j.g. Alex Pantages, of the Surgical Intensive Care Unit (April); and Agatha Onwuka of Discharge Planning (May). Also, Navy Capt. Valerie Morrison, former director of nursing services at WRNMMC, received the DAISY Nurse Leader Award on May 30 prior to her departure from the medical center for a new assignment.

DAISY Nurse Leader

The DAISY Nurse Leader Award honors executive leaders, middle managers, educators and preceptors who supervise nurses in health-care facilities. The award also recognizes nursing leaders for supporting and recognizing their direct care staff for the help and services they provide beneficiaries and families.

A teary-eyed Morrison, who served as the WRNMMC nursing director for more than two years, said her Walter Reed Bethesda assignment was probably one of the “most challenging, but exciting tours during her 28 years of service.” She called the nursing team at WRNMMC “amazing,” saluting them with the declaration, “This is not about me; this is all about you and what you do every day for our deserving beneficiaries and their families.”

Extraordinary Nurses

A patient nominated Altuhov for the February DAISY award, stating the Sailor “was sharp, attentive, kind and very professional” during an unexpected injection incident. “This nurse is a keeper and very level headed in a crisis. I certainly hope her the best. This nurse was great,” the patient added.

March DAISY Award

A family member of a patient who nominated Sherman for the March DAISY award shared similar comments about the ensign, stating, “[I] just wanted to let you know your staff was exceptionally helpful and professional. One particular nurse on duty last night who helped us move my husband to another unit is the one that really went the extra mile. As soon as we entered the new unit, it was bare (furniture wise) [with] only one upright chair in the room. So I asked the folks at the nursing station if there was at least a couch that we could have so that I would have something to sleep on as companion for my husband. There was none, so I went back inside the room, so upset.

“About 30 minutes later, this nurse and the nurse on the new unit were hauling a loveseat couch [into the room]. We were so thankful,” the family member added.

April DAISY Award

A staff provider nominated Pantages for the April



DEPARTMENT OF DEFENSE PHOTO BY BERNARD S. LITTLE

Navy Hospitalman Alona Altuhov of 4 East (left) receives the February DAISY Award for Extraordinary Nurses from Navy Capt. Valerie Morrison, former director of nursing services at Walter Reed National Military Medical Center.

DAISY award, explaining, “I’ve worked with him on multiple occasions throughout the year, and he is consistently one of the best nurses I have ever worked with both in the unit and as a RRT (rapid response team) nurse. His patients routinely praise this nurse’s care.”

The nominator stated Pantages “went beyond the responsibilities and led directly to a successful resuscitation” of a patient on April 1. “As soon as we arrived (in the operating room), this nurse became invaluable to the resuscitation process. In addition to literally running to get an ultrasound and other supplies [that] this nurse knew we would need, he provided exemplary clinical acumen and leadership during the code. On his own initiative, this nurse helped organize the nursing staff/OR techs/residents, ensuring proper rotation of personnel performing CPR so that the high quality could be maintained.

“While doing this, he also consistently anticipated the next steps in care, having the medications already drawn up and ready to give prior to the team needing them so that there was no delay in administration,” the nomination read.

“When there was any difficulty in conducting care, this nurse addressed the issue and fixed it to include troubleshooting the arterial line and replacing the defibrillation pads mid-code....This nurse then continued to lead the efforts in the unit, working well beyond when the shift ended,” the nominator continued.

“Overall, his initiative in going beyond the job description to go to the OR, his expert clinical judgement and leadership during the code and willingness to extend a long shift to help care for the patient led directly to this patient having a good outcome. Then in subsequent days, he continued to check on the patient’s progress despite not being the primary nurse, showing continued compassion and commitment to care. This nurse’s action truly reflected the highest level of the health-care

professionals that I have ever worked with,” the nomination concluded.

May DAISY Award

A family member nominated Onwuka for the May DAISY Award, stating about the discharge planning nursing team member, “This type of nurse by the nature of her duties tend to be helpful to patients and families as they leave the hospital to go either to a rehab facility or home. In my 75 years, I’ve met a lot of them, but this nurse stands out.”

The military spouse added that Onwuka was “aware and compassionate” concerning the patient’s and family situation. “[She] helped me get through this third in a row hospital experience. The spouse added Onwuka provided her with additional care information for after her husband’s discharge from WRNMMC, and also “spent extra time in her busy schedule to explain the information. This nurse asked the right questions and was extremely professional.” The spouse stated Onwuka also did more research into patient care options to assist the couple after the husband’s discharge.

“[Onwuka] went above and beyond in the commitment to giving quality customer service,” the family member continued. “This nurse serves as an inspiration to all who meet her with such a positive, can-do attitude. This nurse made a real difference in our hospital experience,” the nomination concluded.

Anyone can nominate a member of the WRNMMC nursing team for the DAISY award. Nominations for the DAISY award can be submitted to any nurse or clerk in WRNMMC directorate of nursing services, or e-mailed to joan.loepkerduncan.civ@mail.mil. Nominations can be mailed to Joan Loepker-Duncan, WRNMMC, 8930 Brown Drive, Bldg. 9, Room 2894, Bethesda, Maryland 20889. For additional information about the DAISY award at WRB, contact Loepker-Duncan at 301-319-4617.

Bumps & Bites: Protecting Yourself From Pests, Plants

By Mark Oswell
WRNMMC PA Specialist

After a day outdoors, you reach down to scratch an itch on your leg and notice a red bump.

Mosquito bite? Tick? Poison ivy?

Summer brings not only hot muggy days to the Mid-Atlantic region, but also a litany of bumps and bites ranging from ticks to jellyfish stings.

“Some of the more common pests include mosquitos, hymenoptera (wasp, bee, hornet, yellow jacket, fire ant), ticks, blackflies, sandflies, and mites (or chiggers),” according to Navy Lt. Cmdr. (Dr.) Diana Lindsey, Walter Reed National Military Medical Center allergist/immunology fellow.

“Unfortunately, you cannot always identify what type of bug has bitten you,” according to Army Capt. (Dr.) Casey Chern, WRNMMC staff dermatologist. In the United States, it’s common to experience a bite or sting from mosquitoes, fleas, bedbugs, mites, spiders, ticks, fire ants, bees, wasps and hornets.

“Most bug bites and stings can be safely treated at home with topical medication, such as hydrocortisone cream or ointment, or an oral antihistamine to reduce the itch,” explained Chern. “However, sometimes a bug bite or sting could turn into something serious, particularly if you have been bitten or stung by many insects at the same time.”

Bed bugs — Summer trips to new places or familiar haunts are a staple for many people. As such, they sleep in unfamiliar places – a tent, a hotel bed, a friend’s guest room, etc. And while most of these places are free and clear of creepy crawlies, bed bugs remain an issue nationwide. Last year, numerous news articles noted an uptick in bed bug incidents.

“Bed bug bites may be more prevalent in the summer,” explained Army Maj. (Dr.) Martin Evans, Walter Reed Bethesda staff allergist/immunology fellow. “It is not clear that bed bugs are dormant in winter or whether people are more likely to travel in summer. It does appear that people are more likely to receive bites in the summer.”

According to the Federal Trade Commission, bed bugs are visible to the naked eye, but often hide in cracks and crevices. Other signs of bed bugs are small dark spots and rusty or reddish stains on bed sheets or mattresses caused by bed bugs being crushed.

The FTC recommends the best ways to prevent bed infestation while traveling are:

- Use luggage racks to hold your suitcases when packing and unpacking
- Check the mattress and headboard before getting into bed
- When you get home, unpack directly into a washing machine, and wash and dry on the highest temperature setting
- Inspect and then vacuum all luggage, and empty the vacuum outside

Chiggers — Although not poisonous, the bite from these mite larvae are known to create severe itching and hives. The primary treatment for the itching is through the use of antihistamines and corticosteroid creams or lotions, according to the National Institutes of Health’s U.S. National Library of Medicine.

Heat Rash (aka Prickly Heat) – According to Chern, heat rashes are caused by blocked sweat glands. “Because the sweat cannot get out, it builds up under your skin, causing a rash and tiny, itchy bumps. When the bumps burst and release sweat,

many people feel a prickly sensation on their skin.”

“Anything you can do to stop sweating profusely will help reduce your risk,” said Chern.

Tips to help sweat less and decrease the risk of getting prickly heat include: wearing light-weight, loose-fitting clothes made of cotton; exercising outdoors during the coolest parts of the day or moving your workout indoors where you can be in air-conditioning; and keeping your skin cool by using fans, cool showers or air-conditioning when possible.

Imported fire ants — Although typically seen in the South, imported fire ants are an invasive species that have recently crossed the Potomac into Maryland.

According to the NIH’s National Institute for Occupational Safety and Health, “Fire ants bite and sting. They are aggressive when stinging and inject venom, which causes a burning sensation. Red bumps form at the sting, and within a day or two they become white fluid-filled pustules.”

Immediate medical care is to rub off ants briskly, as they will attach to the skin with their jaws. Antihistamines may help those with mild symptoms, but injectable epinephrine might be necessary for severe allergic reactions. If the sting causes severe chest pain, nausea, severe sweating, loss of breath, serious swelling, or slurred speech – take the victim to an emergency medical facility immediately.

Jellyfish — There are more than 2,000 types of jellyfish found in the world, with approximately 70 being harmful to humans. Jellyfish tentacles can still sting even after they have washed up onto shore. According to the Smithsonian Institute, jellyfish have special cells along their tentacles called cnidocytes. Within these cells are harpoon-like structures full of venom, called nematocysts which shoot out when triggered by touch and can penetrate human skin.

Although there’s a myth about urine relieving jellyfish stings, that not the case. Pouring freshwater—including urine—on the area will change the composition of the solution surrounding

the remaining cells and may actually trigger the release of more nematocysts and venom.

Jellyfish sting management will vary according to the severity of symptoms and can include medications, such as diphenhydramine, steroids, pain medication, and antibiotics, according to the Centers for Disease Control and Prevention.

Poisonous plants – The genus Toxicodendron includes poison ivy, poison oak and poison sumac, all of which produce a clear liquid compound called urushiol.

Contrary to popular belief, the rash will occur only where the plant oil has touched the skin, so a person with poison ivy can’t spread it on the body by scratching, according to the U.S. Food and Drug Administration’s website. It may seem like the rash is spreading if it appears over time instead of all at once, but this is either because the plant oil is absorbed at different rates on different parts of the body or because of repeated exposure to contaminated objects or plant oil trapped under the fingernails. Even if blisters break, the fluid in the blisters is not plant oil and cannot further spread the rash.

The FDA recommends that if you do come into contact with one of these poisonous plants to wash your skin in soap and cool water as soon as possible if you come in contact with a poisonous plant. And not to scratch the blisters as bacteria from under your fingernails can get into them and cause an infection.

To relieve the itching from urushiol, the FDA / CDC and others recommend using a wet compresses or soaking in cool water; applying over-the-counter topical corticosteroid preparations or taking prescription oral corticosteroids. Applying topical OTC skin protectants, such as zinc acetate, zinc carbonate, zinc oxide, and calamine dry the oozing and weeping of poison ivy, poison oak, and poison sumac can also be beneficial. Protectants such as baking soda or colloidal oatmeal relieve minor irritation and itching. Aluminum acetate is an astringent that relieves rash.

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Tick-Talk: Protect Yourself Against Tick-Borne Diseases

By Hospitalman Mario Cruz Ortiz (WRNMMC Preventive Medicine) and Spc. D'Aisha Exhem (Environmental Health)

It's that time of the year again, tick season.

Do you know that some of the most common tick-borne diseases found throughout the Maryland/DC/Virginia areas are Lyme disease, Anaplasmosis, Rocky Mountain Spotted Fever and STARI disease?

Are you adequately protecting yourself and your family from tick-borne diseases?

Symptoms

Have you ever felt any of these symptoms: fever/chills, aches, pains (including headaches), and fatigue? Many of us have, and it doesn't mean you have tick-borne disease, but you could. Ticks found in Maryland can carry Lyme disease transmitted by the blacklegged tick, Anaplasmosis transmitted by the blacklegged tick, Rocky Mountain Spotted Fever (RMSF) transmitted by the American dog tick, and STARI (Southern Tick-Associated Rash Illness) transmitted by the lone star tick.

Prevention

Before going out to areas known to harbor ticks, treat clothing and gear

with 0.5 percent permethrin products. Permethrin remains protective through several washings. It can be used to treat boots, clothing and camping gear. Adults can use EPA-registered insect repellents containing DEET, Picaridin, Oil of Lemon Eucalyptus (OLE) or Para-menthane-diol (PMD). Always follow product instructions, and be careful of their use with small children. Do not use insect repellent on babies younger than 2 months old and do not use products containing OLE or PMD on children under 3 years old. Over the counter products containing DEET are approved for use on children.

While outdoors, avoid wooded and brushy areas with high grass/leaf litter and walk in the center of trails. Check your body for ticks after being outdoors, paying close attention to under the arms, in and around the ears, back of the knees, in and around the hair, between the legs, and around the waist.

What can I do with an embedded tick?

If a tick is embedded in your skin, use fine-tipped tweezers to grasp the tick as close to the skin surface as possible. Don't twist or jerk the tick; this can cause the mouth-parts to break off and remain in the skin. If this occurs seek medical attention to ensure the entire tick is removed.

In cases of ticks embedded in humans,

Walter Reed National Military Medical Center's Environmental Health (EH) Service can assist. First, if you remove an embedded tick from your skin, seek medical attention. Your health-care provider may choose to either test you for a tick-borne disease and/or may treat you preventively for tick-borne infections. Second, you may choose to place the tick in a sealed bag or container and deliver the package to the EH team, which will in turn submit the specimen for tick borne disease testing. The EH point of contact can be reached at 301-400-3870.

Pets

Pets are also very susceptible to tick bites and tick-borne diseases. Vaccines are not available for most of the tick-borne diseases of dogs. Treating your pet with repellent can prevent the pet from getting infected and bringing ticks into your home. Cats are extremely sensitive to a variety of chemicals. Do not apply any tick prevention products to your cats without first asking your veterinarian. Fort Meade, Maryland veterinarians, which services WRNMMC, will take a tick that has been embedded in your pets and send it to the Vector-Borne Zoonosis Detection Laboratory (VBZDL). The VBZDL is able to run a variety of tests to determine if the tick or pet carries tick-

borne disease. Animals that are positive for tick-borne diseases are often treated with the same systemic antibiotics used in humans. For more pet related questions, please contact the Fort Meade Branch, US Army Public Health Activity at 301-677-1318.

What are we doing for you?

WRNMMC Environmental Health Service conducts tick surveys to determine the establishment of tick populations on Naval Support Activity Bethesda. Physical "tick drags" are conducted on NSAB. The objective in collecting ticks is to submit samples for testing to identify if ticks collected on the installation carry disease pathogens. This allow us to assess the risk of human tick-borne infection and educate the WRNMMC population on proper procedures to protect themselves from tick-borne infections. For further assistance you can contact them at 301-400-3870.

For more information on tick-borne diseases and prevention, please access the following Centers for Disease Control and Prevention website at www.cdc.gov/ticks/index.html.



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JONES

From
Page 3

“I thought [the pager] would be a cool thing to showcase,” says André, remembering he took it while his parents were away.

He lost the pager after grabbing the wrong pair of pants after a basketball game and when his parents returned, he remembers his father looking for the pager.

“I knew I had to be honest about it,” André says, telling his father, “I took it and I can’t find it.” He had to drive me to go retrieve the pager. I remember my dad asking me, ‘Who were you expecting to page you?’ ... It was something that sounded cool initially in my mind and that was really a bonehead moment.”

And when André’s daughter was born, his dad was on deployment in Kuwait and André says the Sailors there told him he was too young to be a grandpa, so they recommended that he should be called “G-pop” instead.

“That’s what my kids call him,” André says.

SINGING

Singing has been a major part of Jones’ life – before and after he joined the Navy.

“If you know anything about Marvin, he did quite a bit of singing in his



COURTESY PHOTO FROM MRS. JONES

Capt. Marvin Jones, NSAB commanding officer, poses with Mrs. Jones and their children for a family photo.

youth,” his brother, Thomas says.

In high school, Marvin was part of Guys of Paradise that Thomas recalls getting “standing ovations and girls standing on chairs whenever they sang.”

He was part of the Chicago Children’s Choir and as an adult sang with funk/disco band Heat Wave.

Alicia says many people know her dad is a talented singer, but he also has perfect pitch and can detect perfect pitch – and he’s a karaoke star.

“Any karaoke bar or restaurant if a

slot opens up he has his playlist ready,” she says, saying he always starts with “My Girl” and chooses the next song after gauging the temperature of the room.

Lillian says he tried out for a select Air Force singing group, “Tops in Blue,” several times before finally making it as an alternate.

“It was strange, when he made it he says, ‘You know what? I can’t do this. Because that means I’m going to be away from my family for six months,’” she says. “Our son was just a couple

months old then and ... he says, ‘This has been my dream. I made it this far, but I have a son now and I can’t sacrifice that.’ I supported him either way, but I was just shocked ... When he talks about family, he really means family.”

RETIREMENT

Bradley says he’s been offering Jones some advice on how to handle retirement.

“First I tell him to take a deep breath and smell all the roses and make sure he’s ready to get back to work before he goes all in at 110 percent just like he is now,” Bradley says. “I wish I would’ve taken more time – I tell him, ‘Take as much time as you feel you need and make sure you’re ready to get back in the race.’”

Lillian says after he retires from the military, they plan to live in Falls Church, Va. for a few years until they settle somewhere with “water and sun. That’s where we’re going to chill and kick up our heels and enjoy it.”

Before he retires, she says she told him to “enjoy every day” because retirement is going to be a difficult transition.

“I think about how hard it’s going to be when he leaves, because he’s gone all his adult life in the military,” Lillian says. “And that change, that break away, I don’t think it’s going to hit him until the last day.”



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